

**Fill in this information to identify the case**

Debtor name Stanford Sonoma Corp.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number 23-30748  
(if known)

☐ Check if this is an amended filing

Official Form 206A/B

**Schedule A/B: Assets -- Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

**2. Cash on hand**

\_\_\_\_\_

**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. CrossFirst Bank Checking account Checking account 7 4 0 8 \$82.22

**4. Other cash equivalents (Identify all)**

Name of institution (bank or brokerage firm)

**5. Total of Part 1**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$82.22**

**Part 2: Deposits and prepayments**

**6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
- ☐ Yes. Fill in the information below.

Debtor Stanford Sonoma Corp. Case number (if known) 23-30748  
Name

Current value of  
debtor's interest

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$0.00**

**Part 3: Accounts receivable**

**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes. Fill in the information below.

Current value of  
debtor's interest

**11. Accounts receivable**

11a. 90 days old or less: \$0.00 — \$0.00 = ..... → \$0.00  
face amount doubtful or uncollectible accounts

11b. Over 90 days old: \$117,156.64 — \$75,000.00 = ..... → \$42,156.64  
face amount doubtful or uncollectible accounts

**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$42,156.64**

**Part 4: Investments**

**13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes. Fill in the information below.

Valuation method  
used for current value

Current value of  
debtor's interest

**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity: % of ownership:

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

**17. Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

**\$0.00**

**Part 5: Inventory, excluding agriculture assets**

**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.  
☐ Yes. Fill in the information below.

Debtor **Stanford Sonoma Corp.**  
NameCase number (if known) **23-30748**

General description	Date of the last physical inventory MM/DD/YYYY	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. Raw materials

20. Work in progress

21. Finished goods, including goods held for resale

22. Other inventory or supplies

23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

**\$0.00**

24. Is any of the property listed in Part 5 perishable?

- ☐ No  
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No  
☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming or fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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28. Crops--either planted or harvested

29. Farm animals *Examples:* Livestock, poultry, farm-raised fish

30. Farm machinery and equipment (Other than titled motor vehicles)

31. Farm and fishing supplies, chemicals, and feed

32. Other farming and fishing-related property not already listed in Part 6

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

**\$0.00**

34. Is the debtor a member of an agricultural cooperative?

- ☐ No  
☐ Yes. Is any of the debtor's property stored at the cooperative?  
☐ No  
☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☐ No  
☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☐ No  
☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

Debtor **Stanford Sonoma Corp.**  
NameCase number (if known) **23-30748****Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.  
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. Office furniture

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

**\$0.00**

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No  
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.  
☐ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

48. **Watercraft, trailers, motors, and related accessories** Examples: Boats trailers, motors, floating homes, personal watercraft, and fishing vessels

49. Aircraft and accessories

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

**\$0.00**

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No  
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

Debtor Stanford Sonoma Corp.  
NameCase number (if known) 23-30748**Part 9: Real property****54. Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.  
☐ Yes. Fill in the information below.

**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

**56. Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

**\$0.00****57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☐ No  
☐ Yes

**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☐ No  
☐ Yes

**Part 10: Intangibles and Intellectual Property****59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.  
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

**60. Patents, copyrights, trademarks, and trade secrets****61. Internet domain names and websites**

<u>stanfordsonoma.com</u>			<u>Unknown</u>
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**62. Licenses, franchises, and royalties****63. Customer lists, mailing lists, or other compilations****64. Other intangibles, or intellectual property****65. Goodwill****66. Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

**\$0.00****67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?**

- ☒ No  
☐ Yes

**68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

- ☒ No  
☐ Yes

**69. Has any of the property listed in Part 10 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

Debtor **Stanford Sonoma Corp.**  
Name

Case number (if known) **23-30748**

**Part 11: All other assets**

**70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.  
☐ Yes. Fill in the information below.

**Current value of  
debtor's interest**

**71. Notes receivable**

Description (include name of obligor)

**72. Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

**73. Interests in insurance policies or annuities**

**74. Causes of action against third parties (whether or not a lawsuit has been filed)**

**75. Other contingent and unliquidated claims or causes of action of every nature,  
including counterclaims of the debtor and rights to set off claims**

**76. Trusts, equitable or future interests in property**

**77. Other property of any kind not already listed** *Examples: Season tickets, country club membership*

**78. Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$0.00**

**79. Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☐ No  
☐ Yes

Debtor **Stanford Sonoma Corp.**  
NameCase number (if known) **23-30748****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>\$82.22</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$42,156.64</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....</i> →		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+\$0.00</u>	
91. Total. Add lines 80 through 90 for each column. 91a.	<u>\$42,238.86</u>	91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....		<u>\$42,238.86</u>

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Debtor name Stanford Sonoma Corp.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number 23-30748  
(if known)

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Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

*Column A*  
**Amount of claim**  
Do not deduct the value of collateral.

*Column B*  
**Value of collateral that supports this claim**

2.1	Creditor's name	Describe debtor's property that is subject to a lien		
	Creditor's mailing address	Describe the lien		
		Is the creditor an insider or related party?		
		<input type="checkbox"/> No		
		<input type="checkbox"/> Yes		
	Creditor's email address, if known	Is anyone else liable on this claim?		
		<input type="checkbox"/> No		
		<input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred	As of the petition filing date, the claim is:		
	Last 4 digits of account number	Check all that apply.		
	Do multiple creditors have an interest in the same property?	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> No	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.	<input type="checkbox"/> Disputed		

**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.**

\$0.00



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Debtor Stanford Sonoma Corp.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number 23-30748  
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☐ Check if this is an amended filing

Official Form 206E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.  
☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim      Priority amount

**2.1** Priority creditor's name and mailing address

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Is the claim subject to offset?

- ☐ No  
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)( )

Debtor Stanford Sonoma Corp. Case number (if known) 23-30748

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.1</div> Nonpriority creditor's name and mailing address <u>24 HOUR, LTD.</u> <u>8911 DIRECTORS ROW</u> <u></u> <u></u> <u>DALLAS TX 75247</u> Date or dates debt was incurred <u></u> Last 4 digits of account number <u>  </u> <u>  </u> <u>  </u> <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,890.77</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.2</div> Nonpriority creditor's name and mailing address <u>321 Hajoca Corporation. Dallas</u> <u>10431 Miller Road</u> <u></u> <u></u> <u>DALLAS TX 75238-1225</u> Date or dates debt was incurred <u></u> Last 4 digits of account number <u>  </u> <u>  </u> <u>  </u> <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.3</div> Nonpriority creditor's name and mailing address <u>ABLE MACHINERY MOVERS, INC.</u> <u>600 Westport Parkway</u> <u></u> <u></u> <u>Grapevine TX 76051</u> Date or dates debt was incurred <u></u> Last 4 digits of account number <u>  </u> <u>  </u> <u>  </u> <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$13,075.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.4</div> Nonpriority creditor's name and mailing address <u>ACCUREX</u> <u>PO Box 410</u> <u></u> <u></u> <u>Schofield WI 54476</u> Date or dates debt was incurred <u></u> Last 4 digits of account number <u>  </u> <u>  </u> <u>  </u> <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$50,051.09</u>

Debtor **Stanford Sonoma Corp.** Case number (if known) **23-30748**

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<b>3.5</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,768.28
	ACCUTEMP PRODUCTS, INC	<input type="checkbox"/> Contingent	
	11919 JOHN ADAMS DRIVE	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	NEW HAVEN IN 46774		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.6</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$10,867.50
	ACES STAINLESS, LLC	<input type="checkbox"/> Contingent	
	2501 S. 15TH ST.	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	CORSICANA TX 75110		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.7</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$960.00
	ACM - ARCHITECTURAL CARPENTRY MATERIALS	<input type="checkbox"/> Contingent	
	P.O. BOX 195187	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	DALLAS TX 75219		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.8</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,007.93
	ACME BRICK	<input type="checkbox"/> Contingent	
	244 Luna Road #160	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	Carrollton TX 75006		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.9</div> Nonpriority creditor's name and mailing address <b>Admiral Craft Equipment</b> <b>55 JERICO TPKE</b> <b>SUITE 302A</b>  <b>JERICO</b> <b>NY</b> <b>11753</b> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,815.89</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.10</div> Nonpriority creditor's name and mailing address <b>ADP, LLC</b> <b>1851 N RESLER DRIVE MS-600</b>  <b>EL PASO</b> <b>TX</b> <b>79912</b> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.11</div> Nonpriority creditor's name and mailing address <b>ADT COMMERCIAL</b> <b>PO BOX 219044</b>  <b>KANSAS CITY</b> <b>MO</b> <b>64121-9044</b> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$287.43</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.12</div> Nonpriority creditor's name and mailing address <b>Advance Tabco</b> <b>325 WIRELESS BLVD</b>  <b>HAUPPAUGE</b> <b>NY</b> <b>11788-3973</b> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,601.58</b>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

**3.13** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$0.00

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

**AERO MANUFACTURING CO, INC.****310 ALLWOOD ROAD****CLIFTON, NJ 7012**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**3.14** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$14,795.91

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

**Lawsuits****Ailco Equipment Finance Group****c/o Barnett & Garcia, PLLC****3821 Juniper Trace, St 108****Austin TX 78738**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**3.15** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$0.00

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

**AIR MAC****PO BOX 561707****DALLAS TX 75356**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**3.16** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$2,537.44

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

**Airco****3880 IRVING BLVD****DALLAS TX 75247**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

Debtor Stanford Sonoma Corp. Case number (if known) 23-30748

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<b>3.17</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,767.92</u>
	<u>Alfa International</u>	<input type="checkbox"/> Contingent	
	<u>4 KAYSAL COURT</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<u>ARMONK NY 10504-1309</u>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.18</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	<u>ALL SIZE PALLET SUPPLY</u>	<input type="checkbox"/> Contingent	
	<u>12010 CRUMPTON</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<u>BALCH SPRINGS TX 75180</u>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.19</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$28,257.10</u>
	<u>American Wholesale Lighting</u>	<input type="checkbox"/> Contingent	
	<u>1725 RUTAN DR</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<u>LIVERMORE CA 94551</u>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.20</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,014.84</u>
	<u>APOLLO MACHINES TOOL SERVICE INC.</u>	<input type="checkbox"/> Contingent	
	<u>P.O. BOX 5708</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<u>ARLINGTON TX 76005</u>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Stanford Sonoma Corp. Case number (if known) 23-30748

**Part 2: Additional Page**

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Amount of claim

<b>3.21</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$6,002.82</u>
	<u>APW WYOTT</u>	<input type="checkbox"/> Contingent	
	<u>P.O. BOX 841466</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<u>DALLAS TX 75284-1466</u>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.22</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	<u>ARCBEST</u>	<input type="checkbox"/> Contingent	
	<u>PO BOX 10048</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<u>FORT SMITH AR 72917-0048</u>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.23</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	<u>ARNOLD BROTHERS FOREST PRODUCTS</u>	<input type="checkbox"/> Contingent	
	<u>201 NORTH BELTLINE ROAD</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<u>IRVING TX 75061</u>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.24</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$135.00</u>
	<u>ARTIC AIR</u>	<input type="checkbox"/> Contingent	
	<u>7550 Market Place Dr</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<u>Eden Prairie MN 55344</u>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor **Stanford Sonoma Corp.** Case number (if known) **23-30748**

**Part 2: Additional Page**

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Amount of claim

<b>3.25</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$177.12
	ATMOS	<input type="checkbox"/> Contingent	
	PO BOX 790311	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	ST LOUIS MO 63179-0311		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.26</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$35,351.83
	Atosa Catering Equipment, Inc.	<input type="checkbox"/> Contingent	
	16420 W Hardy Rd STE 245	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	Houston TX 77060		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.27</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$36,226.11
	AutoQuote	<input type="checkbox"/> Contingent	
	880 Baymeadows Way West Suite 500	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	Jacksonville FL 32256		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.28</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	B.J. GLASS COMPANY STAFFORD J HOLDINGS	<input type="checkbox"/> Contingent	
	PO BOX 369	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	CRANDALL TX 75114		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	



Debtor **Stanford Sonoma Corp.** Case number (if known) **23-30748**

**Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.29</div> Nonpriority creditor's name and mailing address  <b>BAILEIGH INDUSTRIAL INC.</b> <b>1625 DUFEK DRIVE</b> <b>PO BOX 531</b>  <b>MANITOWOC WI 54221-0531</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.30</div> Nonpriority creditor's name and mailing address  <b>BBQ GUYS</b> <b>8151 Airline Hwy</b>  <b>BATON ROGUE LA 70815</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$11,756.00</b>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.31</div> Nonpriority creditor's name and mailing address  <b>BG FLOOR CARE</b> <b>100 ARMSTRONG ROAD</b> <b>SUITE 101</b> <b>PLYMOUTH, MA 2360</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.32</div> Nonpriority creditor's name and mailing address  <b>BID ON EQUIPMENT.COM</b> <b>2854 CORPORATE PARKWAY</b>  <b>ALOQUIN IL 60102</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
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Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.33</div> <b>Nonpriority creditor's name and mailing address</b> <b>BK Resources</b> <b>120 FRONTAGE RD</b>  <b>ALTAMONT TX 62411</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,486.17</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.34</div> <b>Nonpriority creditor's name and mailing address</b> <b>BLACKSON BRICK</b> <b>4474 SIGMA ROAD</b>  <b>DALLAS TX 75244</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,618.56</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.35</div> <b>Nonpriority creditor's name and mailing address</b> <b>BORDERLAND RUSTIC HARDWARE, LLC</b> <b>5420 CONNERS</b>  <b>EL PASO TX 79932</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.36</div> <b>Nonpriority creditor's name and mailing address</b> <b>Boyd Metals of Tyler</b> <b>8102 CR 313 E</b>  <b>TYLER TX 75706</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,460.34</b>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.37</div> Nonpriority creditor's name and mailing address <b>Brazos Forest Products, LP</b> <b>2760 N GREAT SOUTHWEST PKWY</b>  <b>GRAND PRAIRIE TX 75050</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,188.75</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.38</div> Nonpriority creditor's name and mailing address <b>BRODNAX 21C PRINTERS</b> <b>737 REGAL ROW</b>  <b>DALLAS TX 75247</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$281.45</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.39</div> Nonpriority creditor's name and mailing address <b>BRUCHA</b> <b>1776 S Jackson Street Ste 603</b>  <b>Denver CO 80210</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$41,097.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.40</div> Nonpriority creditor's name and mailing address <b>BURCH, FINCHER AND COMPANY</b> <b>14785 PRESTON ROAD</b> <b>STE 690</b>  <b>DALLAS TX 75254-6829</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.41</div> Nonpriority creditor's name and mailing address <b>C&amp;T Design and Equipment Company</b> <b>2400 N. KAUFMAN STREET</b>   <b>ENNIS TX 75119</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$13,910.85</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.42</div> Nonpriority creditor's name and mailing address <b>CACTUS MAT MFG. CO</b> <b>930 WEST TENTH ST</b>   <b>AZUSA CA 91702</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$899.01</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.43</div> Nonpriority creditor's name and mailing address <b>Cadco, Ltd.</b> <b>200 INTERNATIONAL WAY</b>   <b>WINSTEAD CT 06098</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$540.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.44</div> Nonpriority creditor's name and mailing address <b>CAM DEVELOPMENT GROUP, INC</b> <b>1891 OLD GRANART ROAD</b> <b>UNIT A</b>   <b>SUGAR GROVE IL 60554</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,000.00</b>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.45</div> Nonpriority creditor's name and mailing address <b>CAMBRO MANUFACTURING CO</b> <b>5801 SKYLAB ROAD</b> <b>P.O. BOX 2000</b>  <b>HUNTINGTON BEACH CA 92647-2056</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$16,175.81</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.46</div> Nonpriority creditor's name and mailing address <b>CANO ELECTRIC</b> <b>7607 FLAGSTONE ST</b>   <b>FORT WORTH TX 76118</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.47</div> Nonpriority creditor's name and mailing address <b>Capitol Light</b> <b>6851 SNOWDEN RD</b>   <b>FORT WORTH TX 76140</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Lawsuits</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$13,059.53</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.48</div> Nonpriority creditor's name and mailing address <b>CaptiveAire</b> <b>4641 PARAGON PARK</b>   <b>RALEIGH NC 27616</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Goods and/or services rendered</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$36,084.55</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.49</div> Nonpriority creditor's name and mailing address <b>CDW DIRECT</b> <b>P.O. BOX 75723</b>   <b>CHICAGO</b> <b>IL</b> <b>60675-5723</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$594.12</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.50</div> Nonpriority creditor's name and mailing address <b>CE-DFW WAREHOUSE SOLUTIONS</b> <b>PO BOC 967</b>   <b>GRAPEVINE</b> <b>TX</b> <b>76099</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.51</div> Nonpriority creditor's name and mailing address <b>CENTRAL HARDWOODS</b> <b>1959 W. NORTHWEST HWY</b>   <b>DALLAS</b> <b>TX</b> <b>75220</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.52</div> Nonpriority creditor's name and mailing address <b>CENTRAL RESTAURANT PRODUCTS</b> <b>7750 GEORGETOWN ROAD</b>   <b>INDIANAPOLIS</b> <b>IN</b> <b>46268-4135</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<b>3.53</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	CHAMPION ENERGY	<input type="checkbox"/> Contingent	
	1500 RANKIN ROAD	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	HOUSTON TX 77073		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.54</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	CINTAS	<input type="checkbox"/> Contingent	
	850 FREEPORT PARKWAY	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	COPPEL TX 75019		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.55</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>
	COLORADO MILL EQUIPMENT	<input type="checkbox"/> Contingent	
	1610 FRY AVENUE	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	CANON CITY CO 81212		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.56</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$2,168.56</u>
	COMPONENT HARDWARE GROUP	<input type="checkbox"/> Contingent	
	P.O. BOX 789482	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	PHILADELPHIA PA 19178-9482		
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.57</div> Nonpriority creditor's name and mailing address <b>CPO COMMERCE, LLC</b> <b>125 HORIZON DRIVE</b>   <b>SUWANEE</b> <b>GA</b> <b>30024</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.58</div> Nonpriority creditor's name and mailing address <b>CSI CONTROL SYSTEM INNOVATORS</b> <b>FOX BLUFF CORP. CENTER</b> <b>1301A BOWES ROAD</b>   <b>ELGIN</b> <b>IL</b> <b>60123</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.59</div> Nonpriority creditor's name and mailing address <b>CT CORPORATION</b> <b>PO BOX 4349</b>   <b>CAROAL STREAM</b> <b>IL</b> <b>60197-4349</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.60</div> Nonpriority creditor's name and mailing address <b>Dakota Premium Hardwoods</b> <b>641 W MOCKINGBIRD LN</b>   <b>DALLAS</b> <b>TX</b> <b>75247</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Goods and/or services rendered</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$5,402.40</b>



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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.61</div> Nonpriority creditor's name and mailing address <b>Dakota Premium Hardwoods</b> <b>641 W Mockingbird Ln</b>  <b>Dallas TX 75247</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,402.40</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.62</div> Nonpriority creditor's name and mailing address <b>DALLAS</b> <b>UTILITIES AND SERVICES</b> <b>1500 MARILLA, 3A</b>  <b>NORTH DALLAS TX 75201</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.63</div> Nonpriority creditor's name and mailing address <b>DARR EQUIPMENT CO.</b> <b>PO BOX 975053</b>  <b>DALLAS TX 75397-5053</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.64</div> Nonpriority creditor's name and mailing address <b>DFW SAFETY &amp; FIRST AID</b> <b>4117 COLLEYVILLE BLVD</b> <b>SUITE 103</b>  <b>COLLEYVILLE TX 76034</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.65</div> Nonpriority creditor's name and mailing address <b>Dickey's Capital Group, Inc.</b> <b>4514 Cole Avenue, Suite 1015</b> <b>Dallas, TX 75205.</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Shareholder</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.66</div> Nonpriority creditor's name and mailing address <b>DIMCO STEEL</b> <b>3901 SOUTH LAMAR</b>  <b>DALLAS TX 75215</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$10,849.30</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.67</div> Nonpriority creditor's name and mailing address <b>Duncan Supply Co., Inc.</b> <b>P.O. BOX 441280</b>  <b>INDIANAPOLIS IN 46244-1280</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$19,545.87</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.68</div> Nonpriority creditor's name and mailing address <b>EDWARDS MANUFACTURING COMPANY</b> <b>DO NOT MAIL INVOICES</b> <b>1107 SYKES STREET</b>  <b>ALBERT LEA MN 56007-0000</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>

Debtor **Stanford Sonoma Corp.**

Case number (if known) **23-30748**

**Part 2: Additional Page**

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Amount of claim

<b>3.69</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$1,786.00</b></u>
	<b>Everest Refrigeration</b>	<input type="checkbox"/> Contingent	
	<b>201 W. ARTESIA BLVD</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>COMPTON CA 90220</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.70</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$1,652.05</b></u>
	<b>Excell Foodservice Equip Dealer Network</b>	<input type="checkbox"/> Contingent	
	<b>7900 E. UNION AVE.</b>	<input type="checkbox"/> Unliquidated	
	<b>SUITE 975</b>	<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>DENVER CO 80237</b>	<b>Goods and/or services rendered</b>	
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.71</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$36.37</b></u>
	<b>FASTENAL COMPANY</b>	<input type="checkbox"/> Contingent	
	<b>PO BOX 1286</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>WINONA MN 55987-1286</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.72</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$60,930.95</b></u>
	<b>FASTSIGNS</b>	<input type="checkbox"/> Contingent	
	<b>141 NORTH AVENUE, NE</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>ATLANTA GA 30308</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.73</div> Nonpriority creditor's name and mailing address FASTSIGNS 1140 W. BARDIN RD. #100  ARLINGTON TX 76017  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-top: 1px solid black; padding-top: 2px;"><b>\$60,930.95</b></div>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.74</div> Nonpriority creditor's name and mailing address FASTSIGNS 18021 SKY PARK CIRCLE STE J  IRVINE CA 92614  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-top: 1px solid black; padding-top: 2px;"><b>\$60,930.95</b></div>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.75</div> Nonpriority creditor's name and mailing address FASTSIGNS 2116 E US HIGHWAY 377  GRANBURY TX 76049  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-top: 1px solid black; padding-top: 2px;"><b>\$60,930.95</b></div>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.76</div> Nonpriority creditor's name and mailing address FISCHER PAPER PRODUCTS, INC. 207 WEST MILLBROOK ROAD SUITE 200  RALEIGH NC 27609  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-top: 1px solid black; padding-top: 2px;"><b>\$0.00</b></div>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.77</div> Nonpriority creditor's name and mailing address <b>FISCHER PAPER PRODUCTS, INC.</b> <b>179 IDA AVENUE</b>   <b>ANTIOCH IL 60002</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.78</div> Nonpriority creditor's name and mailing address <b>FMP - Franklin Machine Products</b> <b>101 MT. HOLLY BYPASS</b>   <b>LUMBERTON NJ 08048</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$2,440.63</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.79</div> Nonpriority creditor's name and mailing address <b>Food Warming Equipment Co., Inc.</b> <b>P.O. BOX 75102</b>   <b>CHICAGO IL 60675-5102</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$10,052.48</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.80</div> Nonpriority creditor's name and mailing address <b>FOODTOPIA - DCKY 043 - STAN S</b> <b>801 SOUTH DENTON TAP ROAD</b>   <b>COPPELL TX 75019-4510</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>

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Amount of claim

**3.81** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

**\$0.00**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

**FREEDOM EQUIPMENT****1707 NORTH RANDALL ROAD****SUITE #370****ELGIN IL 60123**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**3.82** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

**\$0.00**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

**FREIGHT QUOTE INC.****P.O. BOX 9121****MINNEAPOLIS MN 55480-9121**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**3.83** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

**\$0.00**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

**FREIGHT QUOTE INC.****P.O. BOX 9121****MINNEAPOLIS MN 55480-9121**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**3.84** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

**\$3,106.11**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

**Frymaster L.L.C.****P.O. BOX****DALLAS TX 75396**

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

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Amount of claim

**3.85** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

**\$0.00***Check all that apply.***G&I VII 12750 PERIMETER LP (STANFORD S)**☐ Contingent**PO BOX 742186**☐ Unliquidated☐ Disputed

Basis for the claim:

**ATLANTA GA 30374-2186**

Is the claim subject to offset?

Date or dates debt was incurred

☒ No

Last 4 digits of account number

☐ Yes**3.86** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

**\$0.40***Check all that apply.***German Knife**☐ Contingent**4184 Conant St.**☐ Unliquidated☐ Disputed

Basis for the claim:

**LONG BEACH CA 90808**

Is the claim subject to offset?

Date or dates debt was incurred

☒ No

Last 4 digits of account number

☐ Yes**3.87** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

**\$0.00***Check all that apply.***GLOBAL INDUSTRIAL**☐ Contingent**2505 MILL CENTER PARKWAY**☐ Unliquidated**SUITE 100**☐ Disputed

Basis for the claim:

**BUFORD GA 30518**

Is the claim subject to offset?

Date or dates debt was incurred

☒ No

Last 4 digits of account number

☐ Yes**3.88** Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

**\$1,352.40***Check all that apply.***Globe Food Equipment Co.**☐ Contingent**2153 DRYDEN ROAD**☐ Unliquidated☐ Disputed

Basis for the claim:

**DAYTON OH 45439**

Is the claim subject to offset?

Date or dates debt was incurred

☒ No

Last 4 digits of account number

☐ Yes

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.89</div> Nonpriority creditor's name and mailing address <b>GP CONSUMER PRODUCTS LP</b> <b>PO BOX 281523</b>   <b>ATLANTA GA 30384-1523</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.90</div> Nonpriority creditor's name and mailing address <b>GRAINGER INDUSTRIAL SUPPLY INC.</b> <b>2701 W KINGSLEY ROAD</b>   <b>GARLAND TX 75201</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.91</div> Nonpriority creditor's name and mailing address <b>GS1 US INC.</b> <b>7887 WASHINGTON VILLAGE DRIVE</b> <b>SUITE 300</b>   <b>DAYTON OH 45459</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$165.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.92</div> Nonpriority creditor's name and mailing address <b>Handy-Foil of America, Inc.</b> <b>135 East Hintz Road</b>   <b>WHEELING IL 60090</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>



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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.93</div> <b>Nonpriority creditor's name and mailing address</b> <b>Happy Manufacturing, Inc.</b> <b>5649 Anita Street</b>  <b>Dallas TX 75206</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <b>Shareholder</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.94</div> <b>Nonpriority creditor's name and mailing address</b> <b>HARDWOODS INCORPORATED</b> <b>2 WORMAN'S MILL CT</b>  <b>FREDERICK MD 21701</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,339.85</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.95</div> <b>Nonpriority creditor's name and mailing address</b> <b>Hart &amp; Price</b> <b>6911 Forest Park Rd</b>  <b>Dallas TX 75235</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$14,547.03</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.96</div> <b>Nonpriority creditor's name and mailing address</b> <b>Hatco</b> <b>2750 TOBEY DR</b>  <b>INDIANAPOLIS IN 46219</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,630.17</u>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<b>3.97</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$0.00</b></u>
	<b>HECTOR CASILLAS JR</b>	<input type="checkbox"/> Contingent	
	<b>3009 GRINNELL AVENUE</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>FORT SMITH AR 72908</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.98</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$1,350.00</b></u>
	<b>HIGIER ALLEN &amp; LAUTIN</b>	<input type="checkbox"/> Contingent	
	<b>2711 NORTH HASKELL AVENUE</b>	<input type="checkbox"/> Unliquidated	
	<b>SUITE 2400</b>	<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>DALLAS TX 75204</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.99</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$750.00</b></u>
	<b>Intrycks, LLC</b>	<input type="checkbox"/> Contingent	
	<b>4879 360TH STREET</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>CANNON FALLS MN 55009</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.100</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$0.00</b></u>
	<b>JB HEWITT CO. INC.</b>	<input type="checkbox"/> Contingent	
	<b>HOMESTEAD FINISHING</b>	<input type="checkbox"/> Unliquidated	
	<b>PO BOX 360275</b>	<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>CLEVELAND OH 44136-0005</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.101</div> Nonpriority creditor's name and mailing address <b>JIM C. HAMER COMPANY</b> <b>P.O. BOX 418</b>   <b>KENOVA WV 25530</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.102</div> Nonpriority creditor's name and mailing address <b>JIM SNODGRASS - CONTRACTOR</b> <b>3714 BISHOP HILL DRIVE</b>   <b>CARROLLTON TX 75007</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.103</div> Nonpriority creditor's name and mailing address <b>JM SWANK, LLC (CONAGRA)</b> <b>395 Herky Street</b> <b>PO BOX 365</b>   <b>NORTH LIBERTY IA 52317</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.104</div> Nonpriority creditor's name and mailing address <b>John Boos &amp; Co.</b> <b>3601 S BANKER STREET</b>   <b>EFFINGTON IL 62401</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$12,927.27</b>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.105</div> Nonpriority creditor's name and mailing address <b>KaTom Restaurant Supply</b> <b>305 KATOM DR.</b> <b>SUITE 1</b>  <b>KODAK</b> <b>TN</b> <b>37764</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$111.80</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.106</div> Nonpriority creditor's name and mailing address <b>Kerry Ready</b> <b>5444 TX-121</b>  <b>FRISCO</b> <b>TX</b> <b>75034</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,237.65</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.107</div> Nonpriority creditor's name and mailing address <b>KING ARCHITECTURAL METALS</b> <b>PO Box 572027</b>  <b>DALLAS</b> <b>TX</b> <b>75357</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$766.32</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.108</div> Nonpriority creditor's name and mailing address <b>Klinger's Trading, Inc.</b> <b>3009 Bankers Industrial Dr</b>  <b>Atlanta</b> <b>GA</b> <b>30360</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,449.42</b>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.109</div> Nonpriority creditor's name and mailing address <b>Krowne Metal Corp</b> <b>100 HAUL RD</b>  <b>WAYNE NJ 07470</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$30.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.110</div> Nonpriority creditor's name and mailing address <b>KWS MANUFACTURING COMPANY, LTD.</b> <b>3041 CONVEYOR DRIVE</b>  <b>BURLESON TX 76028</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.111</div> Nonpriority creditor's name and mailing address <b>Lane &amp; McClain Distributors, Inc.</b> <b>2062 Irving Blvd.</b>  <b>IRVING TX 75207</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,856.42</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.112</div> Nonpriority creditor's name and mailing address <b>Lead Forensics, Inc</b> <b>2970 Clairmont Road NE.</b> <b>SUITE 450</b>  <b>ATLANTA GA 30329</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,349.00</b>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.113</div> Nonpriority creditor's name and mailing address <b>Lee Roy Jordan Redwood Lumber</b> <b>11529 Emerald St</b>  <b>Dallas TX 75229</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Lawsuits</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$33,380.52</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.114</div> Nonpriority creditor's name and mailing address <b>LIBERTY MUTUAL INSURANCE</b> <b>P.O. BOX 91013</b>  <b>CHICAGO IL 60680-1171</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.115</div> Nonpriority creditor's name and mailing address <b>LinQ Transport Inc.</b> <b>2004 L. Don Dodson Dr.</b>  <b>BEDFORD TX 76021</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$19,670.18</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.116</div> Nonpriority creditor's name and mailing address <b>LOCKNET</b> <b>800 JOHN C WATTS DRIVE</b>  <b>NICHOLASVILLE KY 40356</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,520.76</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.117</div> Nonpriority creditor's name and mailing address <b>Logistics Dynamics, LLC</b> <b>1140 Wehrle Drive.</b>   <b>AMHERST NY 14221</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,650.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.118</div> Nonpriority creditor's name and mailing address <b>MANPOWER</b> <b>21271 NETWORK PLACE</b>   <b>CHICAGO IL 60673-1212</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.119</div> Nonpriority creditor's name and mailing address <b>Marken Construction Services, Inc.</b> <b>191 North Street</b> <b>#201</b>   <b>BUFFALO NY 14201</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$600.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.120</div> Nonpriority creditor's name and mailing address <b>MARKING SYSTEMS INCORPORATED</b> <b>2601 MARKET STREET</b>   <b>GARLAND TX 75041</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.121</div> Nonpriority creditor's name and mailing address <b>MARSH &amp; MCLENNAN AGENCY</b> <b>7225 NORTHLAND DRIVE NORTH</b> <b>STE 300</b>  <b>MINNEAPOLIS MN 55428</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.122</div> Nonpriority creditor's name and mailing address <b>Mavro &amp; Associates</b> <b>1605 Crescent Circle Court Unit 10</b>   <b>Carrollton TX 75006</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$2,393.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.123</div> Nonpriority creditor's name and mailing address <b>MCNICHOLS COMPANY</b> <b>PO BOX 30300</b>   <b>TAMPA FL 33630</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$3,794.55</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.124</div> Nonpriority creditor's name and mailing address <b>Mercer Culinary</b> <b>1860 SMITHTOWN AVE</b>   <b>RONKONKOMA NY 11779</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$298.96</b>



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Amount of claim

<b>3.125</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$24,337.00</b></u>
	<b>METAL WEST LLC</b>	<input type="checkbox"/> Contingent	
	<b>3730 FORREST LANE</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>GARLAND TX 75042</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.126</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$0.00</b></u>
	<b>METALS LLC GARLAND</b>	<input type="checkbox"/> Contingent	
	<b>3730 FOREST LANE</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>GARLAND TX 75042</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.127</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$5,384.95</b></u>
	<b>MetroPlex Welding Supply, Inc.</b>	<input type="checkbox"/> Contingent	
	<b>19670 W. NORTHWEST HWY</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>DALLAS TX 75220</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
<b>3.128</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$1,500.00</b></u>
	<b>MG Industrial Inc.</b>	<input type="checkbox"/> Contingent	
	<b>21 W. 569 KENSINGTON RD.</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>GLEN ELLYN IL 60137</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Stanford Sonoma Corp. Case number (if known) 23-30748

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Amount of claim

<b>3.129</b>	Nonpriority creditor's name and mailing address  <u>MITCHELL MACHINE MOVING INC.</u> <u>PO BOX 1914</u>  <u>NORTH MASSAPEQUA</u> <u>NY</u> <u>11758</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<b>3.130</b>	Nonpriority creditor's name and mailing address  <u>MLC CAD SYSTEMS</u> <u>4625 W WILLIAM CANNON DRIVE</u> <u>BUILDING 5</u>  <u>AUSTIN</u> <u>TX</u> <u>78749</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<b>3.131</b>	Nonpriority creditor's name and mailing address  <u>MMI GRAIN STORAGE LLC</u> <u>610 WEST VIRGINIA AVENUE</u>  <u>CREWE</u> <u>VA</u> <u>23930</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<b>3.132</b>	Nonpriority creditor's name and mailing address  <u>MOD OP</u> <u>12377 MERIT DR.</u> <u>SUITE 800</u>  <u>DALLAS</u> <u>TX</u> <u>75251</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$26,506.28</b>

Debtor **Stanford Sonoma Corp.**

Case number (if known) **23-30748**

**Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">3.133</div> <b>Nonpriority creditor's name and mailing address</b> <b>Nemco Food Equipment LTD</b> <b>301 Meuse Argonne St</b>  <b>Hicksville OH 43526</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$185.21</b>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">3.134</div> <b>Nonpriority creditor's name and mailing address</b> <b>NOBLE WATER TECHNOLOGIES</b> <b>PO BOX 9033</b>  <b>DALLAS TX 75209</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">3.135</div> <b>Nonpriority creditor's name and mailing address</b> <b>NOVA ALLOYS, INC.</b> <b>1100 CHASE ROAD</b> <b>SUITE 400</b>  <b>MESQUITE TX 75149</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">3.136</div> <b>Nonpriority creditor's name and mailing address</b> <b>OAK STREET LOGISTICS, INC.</b> <b>15952 197TH STREET</b> <b>PO BOX 9</b>  <b>MONTICELLO IA 52310</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.137</div> Nonpriority creditor's name and mailing address _____ <b>Omcan USA</b> _____ <b>15056 SHOEMAKER AVE</b> _____ _____ <b>SANTA FE SPRING</b> <b>CA</b> <b>90670</b> _____ Date or dates debt was incurred      _____ Last 4 digits of account number      _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$463.14</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.138</div> Nonpriority creditor's name and mailing address _____ <b>Orkin, LLC</b> _____ <b>3330 KELLER SPRINGS RD.</b> _____ <b>SUITE 250</b> _____ <b>CARROLLTON</b> <b>TX</b> <b>75042</b> _____ Date or dates debt was incurred      _____ Last 4 digits of account number      _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$738.28</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.139</div> Nonpriority creditor's name and mailing address _____ <b>PAL-SERV OF DALLAS, LLC</b> _____ <b>PO BOX 260845</b> _____ _____ <b>PLANO</b> <b>TX</b> <b>75026-0845</b> _____ Date or dates debt was incurred      _____ Last 4 digits of account number      _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.140</div> Nonpriority creditor's name and mailing address _____ <b>PENNINGTON CONCRETE CONSTRUCTION</b> _____ <b>13350 EULESS STREET</b> _____ _____ <b>EULESS</b> <b>TX</b> <b>76040-7225</b> _____ Date or dates debt was incurred      _____ Last 4 digits of account number      _ _ _ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	_____ <b>\$0.00</b>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.141</div> Nonpriority creditor's name and mailing address <u>PIONEER MACHINE SALES</u> <u>25902 MIA ROSA CT</u>  <u>KATY TX 77494</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.142</div> Nonpriority creditor's name and mailing address <u>Prairie View Industries</u> <u>2620 INDUSTRIAL DR</u> <u>PO BOX 575</u>  <u>FAIRBURY NE 68352</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,843.30
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.143</div> Nonpriority creditor's name and mailing address <u>PROCEILING TILES</u> <u>2510 STANLEY GAULT PKWY</u>  <u>LOUISVILLE KY 40223</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,724.35
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.144</div> Nonpriority creditor's name and mailing address <u>PROJECT TOOL &amp; DIE</u> <u>6955 DANYEUR ROAD</u>  <u>REDDING CA 96001</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.145</div> Nonpriority creditor's name and mailing address <b>Prominox USA</b> <b>2805 MARKET ST.</b> <b>SUITE 150</b>  <b>GARLAND TX 75041</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$80,609.09</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.146</div> Nonpriority creditor's name and mailing address <b>PUCKETT ELECTRIC</b> <b>2602 INDUSTRIAL LANE</b>  <b>GARLAND TX 75041</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.147</div> Nonpriority creditor's name and mailing address <b>QUALSERV SOLUTIONS LLC</b> <b>7400 S. 28TH STREET</b> <b>P.O. BOX 6536</b>  <b>FORT SMITH AR 72908</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.148</div> Nonpriority creditor's name and mailing address <b>REED INDUSTRIAL SYSTEMS, INC</b> <b>P.O. BOX 551611</b>  <b>DALLAS TX 75355-1611</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor Stanford Sonoma Corp. Case number (if known) 23-30748

**Part 2: Additional Page**

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Amount of claim

**3.149** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$15,120.18  
*Check all that apply.*

RELIANT NRG

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

P.O. BOX 1532

**Basis for the claim:**

HOUSTON TX 77251-1532

Date or dates debt was incurred

**Is the claim subject to offset?**

Last 4 digits of account number

- ☒ No  
☐ Yes

**3.150** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$0.00  
*Check all that apply.*

REM RESTAURANT CORPORATION

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

444 IRWIN STREET

**Basis for the claim:**

MUSKEGON MI 49442

Date or dates debt was incurred

**Is the claim subject to offset?**

Last 4 digits of account number

- ☒ No  
☐ Yes

**3.151** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$0.00  
*Check all that apply.*

ROCKLER

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

584 W I-30

**Basis for the claim:**

SUITE 403

GARLAND TX 75043

Date or dates debt was incurred

**Is the claim subject to offset?**

Last 4 digits of account number

- ☒ No  
☐ Yes

**3.152** Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$0.00  
*Check all that apply.*

RUSCO PACKAGING INC.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

PO BOX 226685

**Basis for the claim:**

DALLAS TX 75222-6685

Date or dates debt was incurred

**Is the claim subject to offset?**

Last 4 digits of account number

- ☒ No  
☐ Yes

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.153</div> Nonpriority creditor's name and mailing address <b>Ryder Truck Rental, Inc.</b> <b>3500 BELTLINE ROAD</b>  <b>FARMERS BRANCH TX 75234</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Goods and/or services rendered</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$515.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.154</div> Nonpriority creditor's name and mailing address <b>S.O.T. ABRASIVES AND EQUIPMENT</b> <b>10750 METRIC DRIVE</b>  <b>DALLAS TX 75243</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,632.37</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.155</div> Nonpriority creditor's name and mailing address <b>SAIA MOTOR FREIGHT LINE, LLC</b> <b>P.O. BOX 730532</b>  <b>DALLAS TX 75373-0532</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,577.15</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.156</div> Nonpriority creditor's name and mailing address <b>Salesforce.com, Inc.</b> <b>P.O.Box 203141</b>  <b>DALLAS TX 75320-3141</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,886.47</b>



Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.157</div> Nonpriority creditor's name and mailing address <b>Smart Sheet Inc.</b> <b>Dept 3421</b> <b>P.O.Box 123421</b>  <b>DALLAS TX 75312-3421</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$959.40</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.158</div> Nonpriority creditor's name and mailing address <b>SMK TRI-CITIES INC.</b> <b>PO BOX 2548</b>  <b>PASCO WA 99302</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.159</div> Nonpriority creditor's name and mailing address <b>SOUTHERN DOCK PRODUCTS</b> <b>11431 FERRELL DRIVE</b> <b>SUITE 204</b>  <b>FARMERS BRANCH TX 75234</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.160</div> Nonpriority creditor's name and mailing address <b>Southern Stud Weld</b> <b>3645 Conflans RD</b>  <b>IRVING TX 75061</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$51.00</b>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.161</div> Nonpriority creditor's name and mailing address <u>Southwest Glassware</u> <u>7521 N. I-10 Frontage Rd.</u>  <u>TUCSON</u> <u>AZ</u> <u>85743</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$772.92</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.162</div> Nonpriority creditor's name and mailing address <u>Sparkletts &amp; Sierra Springs</u> <u>P.O.Box 660579</u>  <u>DALLAS</u> <u>TX</u> <u>75266-0579</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$242.46</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.163</div> Nonpriority creditor's name and mailing address <u>SPECTRUM BUSINESS</u> <u>TIME WARNER CABLE</u>  <u>CITY OF INDUSTRY</u> <u>CA</u> <u>91716-0074</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.164</div> Nonpriority creditor's name and mailing address <u>Star Manufacturing Int'l</u> <u>265 Hobson St.</u>  <u>SMITHVILLE</u> <u>TN</u> <u>37166-2812</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$33,303.69</u>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.165</div> Nonpriority creditor's name and mailing address <b>STEEL F/X</b> <b>893 E. FACTORY DRIVE</b>  <b>ST. GEORGE</b> <b>UT</b> <b>84790</b> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.166</div> Nonpriority creditor's name and mailing address <b>STILES MACHINERY</b> <b>800 FREEPORT PARKWAY</b> <b>SUITE 100</b>  <b>COPPELL</b> <b>TX</b> <b>75019</b> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.167</div> Nonpriority creditor's name and mailing address <b>Strategic Growth, Inc.</b> <b>7000 N. Mopac Expressway</b> <b>SUITE #200</b>  <b>AUSTIN</b> <b>TX</b> <b>78731</b> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,700.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.168</div> Nonpriority creditor's name and mailing address <b>SUPERIOR TRAILER SALES CO.</b> <b>4624 NORTH MCCARTY STREET</b>  <b>HOUSTON</b> <b>TX</b> <b>77013</b> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.169</div> Nonpriority creditor's name and mailing address <b>T.G.R. Logistics, Inc.</b> <b>13990 FIR STREET</b>  <b>OREGON CITY</b> <b>OR</b> <b>97045</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,260.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.170</div> Nonpriority creditor's name and mailing address <b>TAMLIN SOFTWARE</b> <b>8140 WALNUT HILL LANE</b> <b>SUITE 525</b>  <b>DALLAS</b> <b>TX</b> <b>75231</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,033.63</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.171</div> Nonpriority creditor's name and mailing address <b>TCS - THE COLOR SPOT</b> <b>839 PICKENS INDUSTRIAL DR</b>  <b>MARIETTA</b> <b>GA</b> <b>30062</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$32,301.30</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.172</div> Nonpriority creditor's name and mailing address <b>TERMINIX COMMERCIAL</b> <b>TERMINIX PROCESSING CENTER</b> <b>401 INTERNATIONAL PARKWAY</b> <b>STE 104</b> <b>RICHARDSON</b> <b>TX</b> <b>75081</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.173</div> Nonpriority creditor's name and mailing address <b>TEXAS COMPRESSOR EAST</b> <b>104 SOUTH LAMAR STEET</b>  <b>DALLAS TX 75117</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.174</div> Nonpriority creditor's name and mailing address <b>TEXAS POLY INC.</b> <b>1375 WESTPARK WAY</b>  <b>EULESS TX 76040</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.175</div> Nonpriority creditor's name and mailing address <b>THE HARTFORD FIRE INSURANCE COMPANY</b> <b>PO BOX 660916</b>  <b>DALLAS TX 75266-0916</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.176</div> Nonpriority creditor's name and mailing address <b>THE HOME DEPOT</b> <b>11255 GARLAND ROAD</b>  <b>DALLAS TX 75218</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Goods and/or services rendered</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$438.05</b>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.177</div> Nonpriority creditor's name and mailing address <b>THE HOME DEPOT</b> <b>6000 SKILLMAN STREET</b>  <b>DALLAS TX 75231</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	        <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.178</div> Nonpriority creditor's name and mailing address <b>THE UPS STORE</b> <b>9540 GARLAND ROAD</b>  <b>DALLAS TX 75218</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	        <b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.179</div> Nonpriority creditor's name and mailing address <b>TIME WARNER CABLE</b> <b>3301 W ROYAL LN</b>  <b>IRVING TX 75063</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	        <b>\$158.58</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.180</div> Nonpriority creditor's name and mailing address <b>TONY COLLINS ART, INC.</b> <b>2005 WALL STREET</b>  <b>DALLAS TX 75215</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	        <b>\$0.00</b>

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Amount of claim

<b>3.181</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$2,483.85</b></u>
	<b>TOTAL QUALITY LOGISTICS</b>	<input type="checkbox"/> Contingent	
	<b>PO BOX 634458</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>CINCINNATI OH 45263-4558</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.182</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$3,235.00</b></u>
	<b>Trade Show Technologies, Inc.</b>	<input type="checkbox"/> Contingent	
	<b>1680 THE GREENS WAY</b>	<input type="checkbox"/> Unliquidated	
	<b>SUITE 100</b>	<input type="checkbox"/> Disputed	
	<b>JACKSONVILLE BEACH, 32250</b>	<b>Basis for the claim:</b>	
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.183</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$4,810.38</b></u>
	<b>Turbo Air</b>	<input type="checkbox"/> Contingent	
	<b>4184 E Conant St</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>Long Beach CA 90808</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

<b>3.184</b>	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u><b>\$7,273.00</b></u>
	<b>UL LLC</b>	<input type="checkbox"/> Contingent	
	<b>333 PFINGSTEN ROAD</b>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b>	
	<b>NORTHBROOK IL 60062</b>		
	Date or dates debt was incurred	<b>Is the claim subject to offset?</b>	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor **Stanford Sonoma Corp.** Case number (if known) **23-30748**

**Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.185</div> Nonpriority creditor's name and mailing address <b>ULINE</b> <b>PO BOX 88741</b>   <b>CHICAGO</b> <b>IL</b> <b>60680-1741</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,048.80</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.186</div> Nonpriority creditor's name and mailing address <b>UNITED MECHANICAL</b> <b>11540 PLANO ROAD</b> <b>PO BOX 551206</b>   <b>DALLAS</b> <b>TX</b> <b>75355-1206</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.187</div> Nonpriority creditor's name and mailing address <b>UNIVAR - PERSONAL CARE AND FOOD INGRD</b> <b>10889 BEKAY ST</b>   <b>DALLAS</b> <b>TX</b> <b>75238</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.188</div> Nonpriority creditor's name and mailing address <b>UNOX, INC.</b> <b>987 AIRLIE PARKWAY</b>   <b>DENVER</b> <b>CO</b> <b>28037</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,988.63</b>



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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.189</div> Nonpriority creditor's name and mailing address <b>V.B. Stainless, Inc.</b> <b>P.O. BOX 887</b>   <b>KENNEDALE TX 76060</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$28,224.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.190</div> Nonpriority creditor's name and mailing address <b>WASTE CONNECTION</b> <b>12150 GARLAND RD</b>   <b>DALLAS TX 75218-1533</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$992.70</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.191</div> Nonpriority creditor's name and mailing address <b>WAYNE'S INDUSTRIAL SERVICE, INC.</b> <b>1409 AVENUE H</b>   <b>GRAND PRAIRIE TX 75050</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.192</div> Nonpriority creditor's name and mailing address <b>WEBSTAURANT STORE</b> <b>42 INDUSTRIAL CIRCLE</b> <b>DEPARTMENT DOOR #21</b>   <b>LANCASTER PA 17601</b>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$16,798.64</u>

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.193</div> Nonpriority creditor's name and mailing address <b>WELDERS WAREHOUSE CORP.</b> <b>P.O. BOX 565226</b>  <b>DALLAS TX 75356</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,351.29</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.194</div> Nonpriority creditor's name and mailing address <b>Wells Bloomfield LLC.</b> <b>265 HOBSON ST.</b>  <b>SMITHVILLE TN 37166</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$30,392.19</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.195</div> Nonpriority creditor's name and mailing address <b>WESCO DISTRIBUTION INC</b> <b>9400 N ROYAL</b> <b>STE 100</b>  <b>IRVING TX 75063</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.196</div> Nonpriority creditor's name and mailing address <b>WICK, PHILLIPS, GOULD AND MARTIN LLP</b> <b>3131 MCKINNEY AVENUE</b> <b>STE 100</b>  <b>DALLAS TX 75204</b>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 2: Additional Page**

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Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.197</div> Nonpriority creditor's name and mailing address <b>WILSON TOOL INTERNATIONAL</b> <b>12912 FARNHAM AVENUE</b>  <b>WHITE BEAR LAKE MN 55110</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-bottom: 1px solid black; width: 100px;">\$0.00</div>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.198</div> Nonpriority creditor's name and mailing address <b>Winco</b> <b>65 INDUSTRIAL ROAD</b>  <b>LODI NJ 07644-2607</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-bottom: 1px solid black; width: 100px;">\$6,948.56</div>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.199</div> Nonpriority creditor's name and mailing address <b>WSM</b> <b>665 MURLARK AVE NW</b> <b>PO BOX 52888</b>  <b>SALEM OR 97304</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-bottom: 1px solid black; width: 100px;">\$3,312.50</div>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.200</div> Nonpriority creditor's name and mailing address <b>Wycliff Douglas Foods, Inc.</b> <b>4808 Eastover Circle</b>  <b>Mesquite TX 75149</b> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>Shareholder</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<div style="border-bottom: 1px solid black; width: 100px;">\$0.00</div>

Debtor **Stanford Sonoma Corp.**Case number (if known) **23-30748****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Bell Nunnally &amp; Martin, LLP</b> <b>2323 Ross Avenue, St 1900</b>  <b>Dallas TX 75201</b>	Line <b>3.60</b> <input type="checkbox"/> Not listed. Explain:	    
4.2	<b>Blendon Roth Law Firm</b> <b>2217 Harwood Rd</b>  <b>Bedford TX 76021</b>	Line <b>3.47</b> <input type="checkbox"/> Not listed. Explain:	    
4.3	<b>Cuccia Wilson, PLLC</b> <b>1910 Pacific Street, St 18850</b>  <b>Dallas TX 75201</b>	Line <b>3.113</b> <input type="checkbox"/> Not listed. Explain:	    
4.4	<b>Law Offices of Charles E. Wear</b> <b>Charles E. Wear, Jr.</b> <b>1811 W. Park Row Dr.</b>  <b>Arlington TX 76013</b>	Line <b>3.48</b> <input type="checkbox"/> Not listed. Explain:	    
4.5	<b>Padfield &amp; Stout, LLP</b> <b>420 Throckmorton Street, St 1210</b>  <b>Fort Worth TX 76102</b>	Line <b>3.113</b> <input type="checkbox"/> Not listed. Explain:	    

Debtor Stanford Sonoma Corp.Case number (if known) 23-30748**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.****Total of claim amounts****5a. Total claims from Part 1**5a. \$0.00**5b. Total claims from Part 2**5b. + \$1,224,183.71**5c. Total of Parts 1 and 2**5c. \$1,224,183.71

Lines 5a + 5b = 5c.

**Fill in this information to identify the case:**

Debtor name Stanford Sonoma Corp.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number 23-30748 Chapter 11  
(if known)

☐ Check if this is an amended filing

Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**

- ☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

**2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

**Fill in this information to identify the case:**

Debtor name Stanford Sonoma Corp.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number 23-30748

(if known)

☐ Check if this is an amended filing

Official Form 206H

**Schedule H: Codebtors**

**12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Does the debtor have any codebtors?**

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor*

*Column 2: Creditor*

**Name**

**Mailing address**

**Name**

*Check all schedules that apply:*

**Fill in this information to identify the case:**

Debtor Name Stanford Sonoma Corp.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number (if known): 23-30748

☐ Check if this is an amended filing

Official Form 206Sum

**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**

**1. Schedule A/B: Assets--Real and Personal Property** (Official Form 206A/B)

1a. <b>Real property:</b> Copy line 88 from Schedule A/B.....	<u>\$0.00</u>
1b. <b>Total personal property:</b> Copy line 91A from Schedule A/B.....	<u>\$42,238.86</u>
1c. <b>Total of all property</b> Copy line 92 from Schedule A/B.....	<u>\$42,238.86</u>

**Part 2: Summary of Liabilities**

**2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D..... \$0.00

**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. <b>Total claim amounts of priority unsecured claims:</b> Copy the total claims from Part 1 from line 5a of Schedule E/F.....	<u>\$0.00</u>
3b. <b>Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....	<u>+ \$1,224,183.71</u>

**4. Total liabilities**

Lines 2 + 3a + 3b..... \$1,224,183.71



**Fill in this information to identify the case and this filing:**

Debtor Name Stanford Sonoma Corp.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS

Case number 23-30748  
(if known)

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets--Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206-Summary)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/15/2023  
MM / DD / YYYY

**X /s/ Aaron Brewer**  
Signature of individual signing on behalf of debtor

**Aaron Brewer**  
Printed name  
**Chief Executive Officer**  
Position or relationship to debtor